- (e) Qualified personnel. Early intervention services must be provided by qualified personnel, including—
 - (1) Audiologists;
 - (2) Family therapists;
 - (3) Nurses;
 - (4) Nutritionists;
 - (5) Occupational therapists;
- (6) Orientation and mobility specialists;
- (7) Pediatricians and other physicians;
 - (8) Physical therapists;
 - (9) Psychologists;
 - (10) Social workers;
 - (11) Special educators; and
- (12) Speech and language pathologists.

(Authority: 20 U.S.C. 1401(1) and (2); 1432(4))

Note: The lists of services in paragraph (d) and qualified personnel in paragraph (e) of this section are not exhaustive. Early intervention services may include such services as the provision of respite and other family support services. Qualified personnel may include such personnel as vision specialists, paraprofessionals, and parent-to-parent support personnel.

[58 FR 40959, July 30, 1993, as amended at 63 FR 18294, Apr. 14, 1998; 64 FR 12535, Mar. 12, 1909]

§ 303.13 Health services.

- (a) As used in this part, *health services* means services necessary to enable a child to benefit from the other early intervention services under this part during the time that the child is receiving the other early intervention services.
 - (b) The term includes—
- (1) Such services as clean intermittent catheterization, tracheostomy care, tube feeding, the changing of dressings or colostomy collection bags, and other health services; and
- (2) Consultation by physicians with other service providers concerning the special health care needs of eligible children that will need to be addressed in the course of providing other early intervention services.
- (c) The term does not include the following:
 - (1) Services that are—
- (i) Surgical in nature (such as cleft palate surgery, surgery for club foot, or the shunting of hydrocephalus); or
- (ii) Purely medical in nature (such as hospitalization for management of con-

- genital heart ailments, or the prescribing of medicine or drugs for any purpose).
- (2) Devices necessary to control or treat a medical condition.
- (3) Medical-health services (such as immunizations and regular "well-baby" care) that are routinely recommended for all children.

(Authority: 20 U.S.C. 1432(4))

Note: The definition in this section distinguishes between the health services that are required under this part and the medicalhealth services that are not required. The IFSP requirements in subpart D of this part provide that, to the extent appropriate, these other medical-health services are to be included in the IFSP, along with the funding sources to be used in paying for the services or the steps that will be taken to secure the services through public or private sources. Identifying these services in the IFSP does not impose an obligation to provide the services if they are otherwise not required to be provided under this part. (See §303.344(e) and the note 3 following that section.)

§ 303.14 IFSP.

As used in this part, *IFSP* means the individualized family service plan, as that term is defined in § 303.340(b).

(Authority: 20 U.S.C. 1436)

§303.15 Include; including.

As used in this part, *include* or *including* means that the items named are not all of the possible items that are covered whether like or unlike the ones named.

(Authority: 20 U.S.C. 1431-1445)

§ 303.16 Infants and toddlers with disabilities.

- (a) As used in this part, *infants and toddlers with disabilities* means individuals from birth through age two who need early intervention services because they—
- (1) Are experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas:
 - (i) Cognitive development.
- (ii) Physical development, including vision and hearing.
 - (iii) Communication development.
 - (iv) Social or emotional development.
 - (v) Adaptive development; or